CALL 1-800-852-7

のなかでしゅの

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESP SE CENTER 1-800-424-8802. WITHIN

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST	1: Generator's US EPA ID No. C A D 0 8 6 5 1 0 0 0	Manifest Docume	mt No.	2. Page 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address MC DONNELL DOUGLAS REALTY CO. 4060 LAKESCOOD BLVD. 6755 FLOOR			B. State	A. State Manifest Document Number 96013993 B. State Generator's ID A A D Q 3 6 0 0 5 6 9 8		
5. Transporter 1 Company Name UNION PACIFIC PRANSPORTS 7. Transporter 2 Company Name	6. US EPA ID Number	624847 9173304	C. State D. Trans	Transporter's ID parter's Phone Transporter's ID		76-8444
9. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 W. EDTY 123	10. US EPA ID Number	9/13/2016	G. State	oorter's Phone Facility's ID J E A H y's Phone) (p + 2	· I · I · I · I
EAST CARBON, UT 34520	0 7 0 9 3			9(0-444-	4457
11. US DOT Description (including Proper Shipp	ing Name, Hazard Class, and ID Number)	12. Cor No.	toiners Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
RO ASSESTOS, 9, NA2212,	PG III	0.01	C M	010101215	Y -	State 151 EPA/Other NONE
b. 20 12 12 12 12 12 12 12 12 12 12 12 12 12						State EPA/Other
						State EPA/Other
d.						State EPA/Other
J. Additional Descriptions for Materials Listed Al FRIABLE ASBESTOS CONTAIN			K. Handl a. c.	ng Codes for Was	tes Listed Abi b. d.	ove
15. Special Handling Instructions and Additional SITE ADDRESS: 19503 S. NO ASBESTOS REQUIREMENT 40 EMERGENCY RESPONSE: 714-	DRMANDIE, TORRANCE, CA CFR 51 (BAGGED, SBALE			JOB#97-10 ERG# 31)9A	
16. GENERATOR'S CERTIFICATION: I hereby packed, marked, and labeled, and are in all if I am a large quantity generator, I certify economically practicable and that I have se threat to human health and the environment waste management method that is available	respects in proper condition for transport by that I have a program in place to reduce ected the practicable method of treatment, OR, If I am a small quantity generator, I	the volume and toxic storage, or disposal of	applicable ity of wast	international and one of the control	national gove degree 1 ho minimizes th	rnment regulations. Ive determined to be
Printed/Typed Name しんみ MARASCS 17. Transporter 1 Acknowledgement of Receipt o	Signature Signature	More co	•		Mont	h Day Year
Printed/Typed Name	Signature Signature f Materials	m-13	Lu.	<i>.</i>	Mont	Day Year
Printed/Typed Name 19. Discrepancy Indication Space	(LSO) Signature	41.	"V.		Montl	Day Year
					9	
보고 있는 나는 다른 수 없었다면 내 이 사람들이 되어 다.	그 그 점점 보고 하다 주었다면 하고 함께요?					
20. Facility Owner or Operator Certification of r	eceipt of hazardous materials covered by this	s manifést except as no	oted in Item	19.	Montl	i de la companya de l

DO NOT WRITE BELOW THIS LINE.

Yellow:

TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS.
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

	UNIFORM HAZARDOUS WASTE MANIFEST		Manifest Document No.	2. Page 1	Information in the shaded areas is not required by Federal law.			
	3. Generator's Name and Mailing Address	6 5 1 0 0 0 5	1 3 0 9 3	ot 4 Manifest Document	10/9/96			
- 5.	MC DONNELL DOUGLAS REALTY CO. 1000 LAKEWOOD BLVD., 6TH FLOOR LONG BEACH CA 90808		B. State (Generator's ID				
	5. Transporter 1 Company Name	. US EPA ID Number	C. State	Transporter's ID				
	UNION PAGERIC PANSFORTATINALS	100066	X / A / D. Transa	onter's Phone				
	Kan D. Januard R. C.	-A-D-0-0-6-9-	1 3 2 0 6		800-576-8444			
	7. Transporter 2 Company Name 8	. US EPA ID Number	E, State 1	ransporter's ID				
	9. Designated Facility Name and Site Address 10	10000 - 1	orter's Phone Facility's ID					
	ECDC ENVIRONMENTAL 1111 W. HWY 123	L H. Facility	<u> T A H </u>	<u> </u>				
	EAST CARBON, UT 04520 U	TC0930	1 2 2 0 1	90	0-644-4651			
	11. US DOT Description (including Proper Shipping Name, Hazard Cla	ass, and ID Number)	12. Containers	13. Total	14. Unit			
	a.	2.48	No. Type	Quantity	Wt/Vol I. Waste Number State			
;	THE AND THE STREET STRE			A	151 EPA/Other			
	BO ASBESTOS, 9, NAIZIZ, PG III		001/ c W	<u>// //////////////////////////////////</u>	AONE			
•					State			
!					EPA/Other			
					State			
)					EPA/Other			
	d.							
					State			
	<u>Historia da la la</u>				EPA/Other			
	J. Additional Descriptions for Materials Listed Above	A Marian	K. Handli	ng Codes for Wast	es Listed Above			
			a.		b.			
	Unitable Administra Politica Intelligible Section		c ,		d.			
-	FRIABLE ASSESTOR CONTAINING WASTS							
15. Special Handling Instructions and Additional Information SITE ADDRESS: 19503 3. NORMANDIE, TORRANCE, CA 90502 CST JOB#97-109A								
	ASBESTOS REQUIREMENT 40 CFR 61 (BAGGED, SEALED & LABELED) ERG# 31							
	EMERGENCY RESPONSE:714-991-8300	200-1001						
	16. GENERATOR'S CERTIFICATION: I hereby declare that the conter	nts of this consignment are f	ully and accurately described	above by proper s	hipping name and are classified,			
	packed, marked, and labeled, and are in all respects in proper co							
	If I am a large quantity generator, I certify that I have a progresconomically practicable and that I have selected the practicable	am in place to reduce the method of treatment, stora	volume and toxicity of waste	generated to the	degree I have determined to be			
	threat to human health and the environment; OR, if I am a small waste management method that is available to me and that I can	quantity generator, I have	made a good faith effort t	o minimize my was	te generation and select the best			
	Printed/Typed Name	Signature			Month Day Year			
_	WAR MARGEL	1 (mh - 1/4)	ka was					
	17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature			Month Day Year			
	Thomas BLNSSIL	The state of the s	13-13-162	1.10	1/12/1/1918			
-	18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature		<u>.</u>	Professional Control of the Control			
					Month Day Year.			
1	19. Discrepancy Indication Space							
				A STATE OF THE STA				
1	20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
	Printed/Typed Name	Signature			Month Day Year			

SE CENTER 1-800-424-8802: WITHIN CALIFORNIA, CALL 1-800-852-7

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESI